

RH 8/5/13

TRANS	State of North Carolina Department of Environment and Natural Resources Division of Waste Management	TRANSFER STATION Facility Annual Report For the period of July 1, 2012-June 30, 2013
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According to (G.S. 130A-309.09D(b)) completed forms must be returned by August 1, 2013 and a copy of this report must be sent to the County Manager of each county from which waste was received. If you have questions or require assistance in completing this report, contact your Regional Environmental Senior Specialist.

Facility Name: Harnett County Anderson Creek Transfer Station Permit: 4309-T- TRANSFER

Facility Website (URL): www.harnett.org/waste/

Physical Address		Mailing Address	
Street 1: <u>1086 Poplar Drive</u>		Street 1: <u>P.O. Box 2773</u>	
Street 2: _____		Street 2: _____	
City: <u>Lillington</u>	County: <u>Harnett</u>	City: <u>Lillington</u>	
State: <u>North Carolina</u>	Zip: <u>27546</u>	State: <u>North Carolina</u>	Zip: <u>27546</u>

Primary Facility Contact Person		Billing Contact Person	
Name: <u>Amanda Bader, PE</u>		Name: <u>Amanda Bader, PE</u>	
Phone: <u>(910) 814-6156</u>	Fax: <u>(910) 814-8263</u>	Phone: <u>(910) 814-6156</u>	Fax: <u>(910) 814-8263</u>
Email: <u>abader@harnett.org</u>		Email: <u>abader@harnett.org</u>	

1. Tipping Fee: \$40.00 per Ton (Attach a schedule of tipping fees if appropriate.)
 Does the tip fee above include the \$2.00 Solid Waste Tax? ☒ Yes ☐ No

2. Did your facility stop receiving waste during this past Fiscal Year? ☐ Yes ☒ No
 If so, please report the date this occurred: _____

3. Are there SWANA or other certified operator(s) at this facility? ☐ Yes ☐ No
 If yes, indicate the following:

Name: <u>Andrew Holland</u>	Certification type and expiration date: <u>MOLO 6/17; TS 4/26/16; LF 2/7/16</u>
Name: <u>Larry Thomas</u>	Certification type and expiration date: <u>TS 4/27/15; LF 4/14/15</u>
Name: <u>James Haney</u>	Certification type and expiration date: <u>TS 4/17/15; LF 2/3/16</u>

4. What other activities occur at this facility? (check all that apply)

☒ Recycling/Reuse Collection
 ☒ Scrap Tire Collection
 ☒ White Goods Collection
 ☐ Household Hazardous Waste Collection

If you checked Recycling/Reuse Collection, please indicate the materials accepted and amount collected: (check all that apply and provide tonnages)

<input type="checkbox"/> Paper _____ tons	<input type="checkbox"/> Fluorescent lightbulbs _____ tons	<input type="checkbox"/> Used oil/oil filters _____ tons	<input type="checkbox"/> Steel Cans _____ tons
<input checked="" type="checkbox"/> Cardboard <u>29.65</u> tons	<input type="checkbox"/> PETE (#1) Plastic _____ tons	<input type="checkbox"/> Aluminum Cans _____ tons	<input checked="" type="checkbox"/> Other Metal <u>233.55</u> tons
<input type="checkbox"/> Wood _____ tons	<input type="checkbox"/> HDPE (#2) Plastic _____ tons	<input checked="" type="checkbox"/> Computer Equipment <u>5.77</u> tons	<input checked="" type="checkbox"/> Televisions <u>18.05</u> tons
<input type="checkbox"/> Glass _____ tons	<input type="checkbox"/> Concrete/rubble/asphalt _____ tons	<input type="checkbox"/> Gypsum/drywall _____ tons	<input type="checkbox"/> Other Plastic _____ tons
<input checked="" type="checkbox"/> Shingles <u>156.38</u> tons	<input checked="" type="checkbox"/> Other (specify) <u>Commingled = 37.01 tons; Miscellaneous Electronics 5.28 tons</u>		

5. Total waste received (INCLUDING WASTE TRANSFERRED AND RECYCLED) at this facility during the period of July 1, 2012, through June 30, 2013. Indicate **tonnage** received by COUNTY of waste origin. Please indicate COUNTY and STATE, if received from another state.

[illegible]

6. Indicate the facility(s) that received your facility's non-recycled waste material:

Grand Total	17,017.49
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NAME, PERMIT #, and LOCATION (city, state) of FACILITY	Facility Type	Tons
SAMPSON COUNTY DISPOSAL, INC. ROSEBORO, NC 82-02	MSW Landfill	17,017.49
TOTAL		17,017.49

REMINDER: According to (G.S. 130A-309.09D(b)), this report must be sent to the Regional Environmental Senior Specialist for your area and a copy of this report must be sent to the County Manager of each county from which waste was received.

Please return your completed report to:

Robert Hearn
1646 Mail Service Center
Raleigh, NC 27699-1646
phone: 919.707.8292 email: Robert.Hearn@ncdenr.gov

CERTIFICATION: I certify that the information provided is an accurate representation of the activity at this facility.

Signature:

Only: I certify that the information provided is an

Amunda L Bader

Date: Jul 31, 2013

Name: Amanda Bader, PE

Title: County Engineer

Phone Number: (910) 814-6151

Email: abader@harnett.org